

Arizona Department of Health Services
Division of Behavioral Health Services
Quality Management Work Plan October 1, 2011 – September 30, 2012

Goal	Strategy	Action Items	Responsible Party	Start Date	End Date
Goal 1. Performance Measures: Contractors will meet the performance standards for the following performance measures: a. Access to Care (ATC) b. Coordination of Care (COC #2) c. Behavioral Health Service Plan (BHSP) d. Behavioral Health Service Provision <u>AHCCCS-owned measures:</u> a. Follow up After Discharge (7 Days) b. Follow up After Discharge (30 Days) c. Treatment of Depression	1.1: ADHS/DBHS to monitor Contractors' compliance with Minimum Performance Standards (MPS) for all performance measures on quarterly basis per AHCCCS Contract as follows: a. ATC: 90% (MPS); 95% (Goal) b. COC: 85% (MPS); 95% (Goal) c. BHSP: 85% (MPS); 95% (Goal) d. Service Provision: 85% (MPS); 95% (Goal) <u>AHCCCS-owned measures:</u> a. F/U after D/C 7 Day: 70% (MPS); 90% (Goal) b. F/U after D/C 30 Day: 80% (MPS); 90% (Goal) c. Depression: TBD (MPS); 90% (Goal)	1.1a:ADHS/DBHS will continue to conduct <i>quarterly performance measure review activities</i> per AHCCCS Contract requirement and as per BQMO Specification Manual FY 2012 as follows: <u>1. Access to Care 23 Day (ATC)</u> <ul style="list-style-type: none"> ADHS/DBHS pulls 90/10 random sample for new enrollments for each GSA (adult and children) from CIS based on adjudicated claims Performance is calculated for each GSA and statewide <u>2. Coordination of Care (COC)</u> <ul style="list-style-type: none"> ADHS/DBHS pulls 90/10 random sample from CIS for each GSA (adult and children) and forwards to RBHAs RBHAs conduct chart reviews for evidence of coordination and returns sample to BQMO, indicating presence or absence of coordination evidence BQMO/IM Team calculates performance for each GSA and statewide <u>3. Behavioral Health Service Plan (BHSP)</u> <ul style="list-style-type: none"> ADHS/DBHS pulls 90%/10% random sample for each GSA (adult and children) and forwards to RBHAs RBHAs forward assessments and treatment plans for each sampled client to BQMO BQMO/OPI review charts to determine status of current assessment and presence of treatment plan reflecting needs defined in the assessment BQMO/IM Team calculates performance based on OPI's reviews tool (attached) for each GSA and statewide <u>4. Behavioral Health Service Provision (BHSPv)</u> <ul style="list-style-type: none"> BQMO/OPI forwards client identifying information of clients who pass on the BHSP measure to ADHS/DBHS/Business Information (BI) along with treatment needs identified on the treatment plans BI pulls encounters for clients in a., above, and matches encounters to service needs identified on the treatment plans 	Office of Performance Improvement	10/01/11	9/30/12

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		1.1b. DBHS will conduct data validation activities of Contractor submitted data review (COC#2) at least twice each year.			
	1.2: ADHS/DBHS to provide technical assistance (TA) and/or issue corrective actions if a Contractor fails to meet the MPS for any of the performance measures.	1.2: ADHS/DBHS will provide TA and/or issue corrective actions if a Contractor fails to: <ul style="list-style-type: none"> Meet the MPS for any of the performance measures for two consecutive quarters, and/or Demonstrate statistically significant decline in performance for any of the performance measures for two consecutive quarters DBHS will provide technical assistance to Contractors as needed. 	Office of Performance Improvement	10/01/11	9/30/12
	1.3: ADHS/DBHS to identify barriers and solutions to improve rates of compliance with performance measure at least bi-annually.	1.3: <ul style="list-style-type: none"> DBHS will review statewide data to identify trends and non compliance on quarterly basis If a Contractor fails to meet MPS or demonstrate a significant decline for any of the performance measures for two consecutive quarters DBHS will require conducting a barrier analysis. DBHS will conduct TA as indicated to assist RBHA in barriers identification and implement solutions. DBHS will conduct training sessions with Contractor QM staff related to quarterly statewide trended data as indicated. 	Office of Performance Improvement	10/01/11	9/30/12
Goal 2. Performance Improvement Projects: 1. AHCCCS has waived the requirement for DBHS to submit a self-selected PIP for CYE 2012 2. AHCCCS-DBHS Current Mandated Collaborative PIP: Improving Coordination of Care for Acute-Care Members Receiving Behavioral Health Services.	ADHS/DBHS to focus resources to collaborate with AHCCCS to ensure Care coordination between acute and behavioral health providers specific to current mandated Collaborative PIP.	<ul style="list-style-type: none"> ADHS will work collaboratively with AHCCCS to facilitate data collection for this PIP ADHS/DBHS will continue to co host meetings between AHCCCS Health Plans and ADHS/DBHS RBHAs for open dialogue regarding data sharing 	Office of Performance Improvement/ PIP Coordinator	10/01/11	9/30/12
Goal 3. Monitoring and Oversight Activities: DBHS and their Contractors will monitor the service delivery system to improve services for behavioral health recipients.	3.1 Ensure Contractor's Annual QM Plan includes sufficient details about the provider monitoring activities	3.1. ADHS/DBHS will : <ul style="list-style-type: none"> Review and approve Contractor Annual QM Plans Evaluate the activities related provider monitoring Provide T/A to Contractors with insufficient provider monitoring plans as needed. 	Office of Performance Improvement	10/01/11	9/30/12

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	3.2 Ensure Contractors' ongoing adherence to the provider monitoring plan.	3.2. ADHS/DBHS will: <ul style="list-style-type: none"> • Conduct data validation activities during which Contractor's provider monitoring activities will be reviewed (Calendar of site visits, TA provided, CAP issued and Follow up on CAP etc) • Will require a CAP or issue a warning if a Contractor found non compliant with its provider monitoring plan. • DBHS will present data validation results in QM committee meetings. 	Office of Performance Improvement	10/01/11	9/30/12
	3.3: Ensure Contactor compliance with Quality of Care review requirements in accordance with ADHS/DBHS QOC Policy (QM 2.7) and APM 960.	3.3: ADHS/DBHS will: <ul style="list-style-type: none"> • Monitor all Incident, Accident, and Death Reports received from each RBHA to: <ul style="list-style-type: none"> ○ Investigate all unknown deaths, accidental deaths, and suicide deaths. ○ Investigate all questionable incidents and accidents reported by RBHA's as outlined in ADHS/DBHS QOC Policy QM 2.7. • Conduct Inter Rater Reliability test among all QOC team staff on weekly basis to ensure consistency in review findings and recommendations • Monitor each RBHA's tracking and trending of QOC concerns and QOC corrective action plans during semi-annual data validation audits. • Provide oversight of each RBHA's QOC policy, QOC process, during annual administrative reviews. • Evaluate and investigate all incidents, accidents and deaths which are referred to ADHS/DBHS from outside referral agencies and stakeholders. 	Office of Performance Improvement	10/01/11	9/30/12
	3.4: Ensure Contractor compliance with Peer Review requirements.	3.4: During Data Validation site visits and ADHS Annual Admin Review, ADHS/DBHS will monitor: <ul style="list-style-type: none"> • Peer Review policy and protocol to ensure compliance with ADHS and AHCCCS requirements • Peer Review Committee process, meeting minutes and agenda to ensure there is no breach in confidentiality. 	Office of Performance Improvement	10/01/11	9/30/12
	3.5: Ensure Contractor compliance with all delegated QM Activities at least annually.	3.5: ADHS/DBHS will: <ul style="list-style-type: none"> • Conduct an Annual Administrative Review of each Contractor to assess compliance with delegated activities. 	Office of Performance Improvement	10/01/11	9/30/12

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		<ul style="list-style-type: none"> Conduct focused reviews and/or ad hoc data validation activities of Contractors as indicated by trended data 			
4. Outcomes Reporting: DBHS will monitor and report system wide prioritized outcomes for recipients receiving behavioral health services.	4.1: DBHS will ensure timely reporting of Outcome Measures for the ADHS/DBHS Outcome Framework/ Dashboard.	4.1. ADHS/DBHS/BQMO will: <ul style="list-style-type: none"> Collect outcome framework data quarterly and annually Conduct analysis of data Regularly update <i>At a Glance</i> reports for use in the outcome dashboard Report findings quarterly and annually in ADHS/DBHS Leadership Team Regularly update Outcome Framework at ADHS/DBHS website for external partner, stakeholder and Consumers 	BQMO/ Business Information	10/01/11	9/30/12
	4.2: DBHS will present statewide outcome data in the QM Committee meetings at least biannually.	4.2: At a Glance Data DBHS will be presented semi annually in the: <ul style="list-style-type: none"> QM Committee Children's QM subcommittee ADHS/DBHS Leadership Team 	BQMO/ Business Information	10/01/11	9/30/12
5. Reporting Requirements: DBHS will submit timely, logical and accurate QM deliverables to AHCCCS per the AHCCCS contract.	5.1 Ensure all QM deliverables are accurate and submitted timely.	5.1a. DBHS QM will conduct quality checks of all data provided in deliverables to AHCCCS before submission.	Office of Performance Improvement	10/01/11	9/30/12
		5.1b. DBHS QM will receive approval for AHCCCS deliverables from ADHS/DBHS Leadership Team prior to submission to AHCCCS.	Office of Performance Improvement	10/01/11	9/30/12
	5.2 Ensure Contractor deliverables are accurate and submitted timely.	5.2a. DBHS will evaluate Contractor timely submission of quarterly and annual deliverables	Office of Performance Improvement	10/01/11	9/30/12
		5.2b. DBHS will conduct data validation activities on Contractor submitted data semi annually.	Office of Performance Improvement	10/01/11	9/30/12
		5.2c. DBHS QM will require a CAP or other performance improvement activity from any Contractor not meeting DBHS deliverables requirements.	Office of Performance Improvement/QM Committee	10/01/11	9/30/12